## SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  REPUBLICAN NATIONAL CO	the name and address of any political committee  OMMITTEE	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR. JOHN E. VEASEY  Mailing Address 88 BROCKTON AVENUE  City HAVERHILL  FEC ID number of contributing federal political committee.  Name of Employer  CEDARDALE HEALTH & FITNESS  Receipt For:  Primary General Other (specify)	State Zip Code MA 01830-2704  C  Occupation HEALTH & FITNESS  Aggregate Year-to-Date ▼  400.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MR. YINGYOT JIM PATANASON  Mailing Address 7235BAIRD AVE.  City  RESEDA  FEC ID number of contributing federal political committee.  Name of Employer  CEDARS SINAI MEDICAL CENTER  Receipt For:  Primary  General  Other (specify)	State Zip Code CA 91335-3069  C  Occupation INVENTORY CONTROL SPECIALIST  Aggregate Year-to-Date ▼  400.00	Date of Receipt  04 08 2014  Transaction ID: 2014M05L11Al06365  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  MS. JACQUELYN MILLER  Mailing Address 31 HERBERT HAYES DR  City  LAWRENCEVILLE  FEC ID number of contributing federal political committee.  Name of Employer  CENTRAL BAPTIST CHURCH  Receipt For:  Primary  General  Other (specify)	State Zip Code GA 30046-5907  C  Occupation CHURCH PIANIST  Aggregate Year-to-Date   580.00	Date of Receipt    Mark
SUBTOTAL of Receipts This Page (optional	)	350.00
TOTAL This Period (last page this line numl	ber only)	